2. AMENDMENT/MODIFICATION NO D001	3. EFFECTIVE DATE February 1, 2008	REQUISITION/PURCHASE REQ NO. S. PROJECT NO (If applicable) 7. ADMINISTERED BY (If other than Item 6) CODE				
i. ISSUED BY CODE						
FAA, MIKE MONRONEY AERONA Aviation, Medical, & Training Team P O BOX 25082 OKLAHOMA CITY OK 73125						
B. NAME AND ADDRESS OF CONTR	ACTOR (No., street, county,	State and ZIP Code)	(X)			DLICITATION NO
(ALL OFFERORS)		\vdash	DTFAAC-08-R 9B. DATED (SI January 24, 200 10A. MODIFIC. CONTRACT/OI	EE ITEM 1 I 08 ATION OF		
				10B. DATED (SEE ITEM A	13)
CODE	FACILITY CODE IS ITEM ONLY APPLIES TO					
(x) The above numbered solicitation is amended acknowledge receipt of this amendment prior to the solicitation of the amendrate of the solicitation which includes a reference to the solicitation of the soli	he hour and date specified in the sol nent; (b) By acknowledging receipt ation and amendment numbers. FA S PRIOR TO THE HOUR AND D submitted, such change may be ma	ficitation or as amended, to of this amendment on each ILURE OF YOUR ACK! ATE SPECIFIED MAY I	oy one th cap NOW! RESU	of the following me y of the offer submi EDGMENT TO BI T IN REJECTION	ethods: (a) By tted; or (c) By RECEIVED OF YOUR O	y completing Items 8 and by separate letter or AT THE PLACE OFFER. If by virtue of this
12. ACCOUNTING AND APPROPRIATION	<u> </u>					
13. THIS ITEM	A APPLIES ONLY TO MO IES THE CONTRACT/OI	RDER NO. AS DES	SCR	BED IN ITEM	I 14.	R NO. IN ITEM 10A.
B. THE ABOVE NUMBERED CONTRACT/ORI appropriation date,etc.)SET FORTH IN I C. THIS SUPPLEMENTAL AGREEMENT IS EN D. OTHER (Specify type of modification as	DER IS MODIFIED TO REFLECT THE TEM 14, PURSUANT TO THE AUTH ITERED INTO PURSUANT TO AUTH	ADMINISTRATIVE CHAN ORITY OF FAR 43.103(b)	iGES(s			
E IMPORTANT: Contractor [] is r	ot,[] is required to sign this do	ocument and return [] cop		ffice.	
The purpose of this amendment is The closing date remains unchang	s to clarify that this is a l	Full and Open cor	npet	itive requiren		
The purpose of this amendment is The closing date remains unchang	s to clarify that this is a l	Full and Open cor Monique Pelletier	npet	itive requiren 405) 954-510	2.	CER (Type or print)
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